

DPW



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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

On 7/19/04

TOWNSEND and TOWNSEND and CREW LLP

By: [Signature]

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Kenji Yamagami

Application No.: 10/608,391

Filed: June 26, 2003

For: METHOD AND APPARATUS FOR  
BACKUP AND RECOVERY SYSTEM  
USING STORAGE BASED  
JOURNALING

Customer No.: 20350

Confirmation No. 8386

Examiner: Unassigned

Technology Center/Art Unit: 2186

PRELIMINARY AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Prior to examination of the above-referenced application, please enter the following amendments and remarks:

**Amendments to the Specification** begin on page 2 of this paper.

**Remarks/Arguments** begin on page 3 of this paper.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>Total Number of Pages in This Submission</b> <u>4</u>	Application Number	10/608,391
	Filing Date	June 26, 2003
	First Named Inventor	Yamagami, Kenji
	Art Unit	2186
	Examiner Name	Unassigned
Attorney Docket Number		16869B-082700US

**ENCLOSURES** (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
<b>Remarks</b> The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Townsend and Townsend and Crew LLP	
	George B. F. Yee	Reg. No. 37,478
Signature		
Date	July 19, 2004	

**CERTIFICATE OF TRANSMISSION/MAILING**

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Typed or printed name	Cynthia McKinley		
Signature		Date	July 19, 2004